

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Black PAC

ADDRESS (number and street)

2090 Adam Clayton Powell Jr. Blvd.

Suite 201A

Check if different  
than previously  
reported. (ACC)

New York

NY

10027

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00609388

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
03 01 2018

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Shropshire, Adrienne, R., ,

Type or Print Name of Treasurer

Signature of Treasurer

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 20 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Black PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 03 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y 03 / 31 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2018		491909.45
(b) Cash on Hand at Beginning of Reporting Period.....	327034.51	
(c) Total Receipts (from Line 19) .....	3635.12	16100.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	330669.63	508009.46
7. Total Disbursements (from Line 31).....	66837.77	244177.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	263831.86	263831.86
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Black PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 03 / 01 / 2018

To:

 M M / D D / Y Y Y Y Y  
 03 / 31 / 2018
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

800.00

6000.00

(ii) Unitemized .....

2835.12

9721.68

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

3635.12

15721.68

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

3635.12

15721.68

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

378.33

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

3635.12

16100.01

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

3635.12

16100.01

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	66837.77	194179.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	66837.77	194179.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	49998.49
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	66837.77	244177.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	66837.77	244177.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3635.12	15721.68
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3635.12	15721.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	66837.77	194179.11
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	378.33
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	66837.77	193800.78

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Kaiser, Christy, , ,**

Mailing Address 4849 Connecticut Ave NW

# A

City

Washington

State

DC

Zip Code

20008-5853

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Georgetown University Hospital

Occupation (for Individual)

Assistant Program Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2018

**Transaction ID : VTEF8PS0XK1**

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Aamodt, Sandra, , ,**

Mailing Address 30100 Positas Rd

City

Winters

State

CA

Zip Code

95694-9754

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Writer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2018

**Transaction ID : VTEF8PSBS34**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Fliegelman, Sandra, , ,**

Mailing Address 242 W Washington Blvd

City

Lombard

State

IL

Zip Code

60148-2547

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Options Clearing Corporation

Occupation (for Individual)

Lead Systems Analyst

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2018

**Transaction ID : VTEF8PMQ6W4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Normile, Dennis, , ,

Mailing Address 2-19-11 Amanuma

City

Anchorage

State

AK

Zip Code

99508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Science Magazine

Occupation (for Individual)

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2018

Transaction ID : VTEF8PN29X5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

800.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Nubia Scott-Bennett**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2018

Mailing Address 1230 Croes Ave  
19-HCity  
BronxState  
NYZip Code  
10472-4536Purpose of Disbursement  
Communications & Organizational Consulting Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** Transaction ID : VTDG0A5714

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Adrienne Shropshire**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2018

Mailing Address 2090 Adam Clayton Powell Jr Blvd  
Ste 201ACity  
New YorkState  
NYZip Code  
10027-4974Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** Transaction ID : VTDG0A570V

Amount of Each Disbursement this Period

6250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank, N. A.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2018

Mailing Address 1825 K St NW

City  
WashingtonState  
DCZip Code  
20006-1245Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** Transaction ID : VTDG0A5714

Amount of Each Disbursement this Period

100.41

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8850.41



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Civix Strategy Group, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2018

Mailing Address 114 N Main St  
Ste 203City  
ConcordState  
NHZip Code  
03301-4953Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : VTDG0A5E8F**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Sage Payment Solutions**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		02		2018

Mailing Address 12120 Sunset Hills Rd  
Ste 500City  
RestonState  
VAZip Code  
20190-5858Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : VTDG0A5CT8**

Amount of Each Disbursement this Period

172.63

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. NGP VAN, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2018

Mailing Address PO Box 392264  
Ste 200City  
PittsburghState  
PAZip Code  
15251-9264Purpose of Disbursement  
Email Services

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : VTDG0A571z**

Amount of Each Disbursement this Period

5100.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

8272.63

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Time Warner Cable**

Mailing Address PO Box 11820

City  
NewarkState  
NJZip Code  
07101-8120Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	3				1	3					2	0	1	8

FEC Identification Number

**C****Transaction ID : VTDG0A570Y**

Amount of Each Disbursement this Period

334.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLDG Management Co. Inc.**Mailing Address 417 5th Ave  
Fl 4City  
New YorkState  
NYZip Code  
10016-2239Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				0	1					2	0	1

FEC Identification Number

**C****Transaction ID : VTDG0A5716**

Amount of Each Disbursement this Period

1584.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Berlin Rosen, Ltd.**Mailing Address 15 Maiden Ln  
Ste 1600City  
New YorkState  
NYZip Code  
10038-5111Purpose of Disbursement  
Strategic Consulting Services & Digital Advertisements

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	0					2	0	1

FEC Identification Number

**C****Transaction ID : VTDG0A5705**

Amount of Each Disbursement this Period

29500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

31419.37

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2018

Mailing Address 200 Vesey St

City  
New YorkState  
NYZip Code  
10285-1000Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : VTDG0A5DC!**

Amount of Each Disbursement this Period

1337.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Westin Peachtree Plaza Hotel**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2018

Mailing Address 210 Peachtree St NW

City  
AtlantaState  
GAZip Code  
30303-1704Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : VTDG0A5DE!**

Amount of Each Disbursement this Period

679.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2018

Mailing Address 60 Massachusetts Ave NE

City  
WashingtonState  
DCZip Code  
20002-4285Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : VTDG0A5DE**

Amount of Each Disbursement this Period

212.50

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1337.55

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2018

FEC Identification Number

**C****Transaction ID : VTDG0A5DH'**

Amount of Each Disbursement this Period

73.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Perkins Coie, LLP**Mailing Address 1201 3rd Ave  
Ste 4900City  
SeattleState  
WAZip Code  
98101-3095Purpose of Disbursement  
Legal & Compliance Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		28		2018

FEC Identification Number

**C****Transaction ID : VTDG0A570X**

Amount of Each Disbursement this Period

11541.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Ashley Green**

Mailing Address 3955 15th Ave S

City  
Saint PetersburgState  
FLZip Code  
33711-2537Purpose of Disbursement  
Field Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2018

FEC Identification Number

**C****Transaction ID : VTDG0A571!**

Amount of Each Disbursement this Period

2916.67

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14457.81

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Nubia Scott-Bennett**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2018

Mailing Address 1230 Croes Ave  
19-HCity  
BronxState  
NYZip Code  
10472-4536Purpose of Disbursement  
Communications & Organizational Consulting Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0A570V**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2500.00

**TOTAL** This Period (last page this line number only).....▶

66837.77